Health Insurance Issuers' Response to Coronavirus (COVID-19)

04/21/2020 Updated: The Alabama Department of Insurance is actively engaged with our health insurance industry to ensure appropriate protections are being implemented in response to the spread of the Coronavirus. The Department has compiled the following information from health insurance issuers providing coverage in Alabama. Please click on the links provided for full details regarding the policies of each issuer.

CVS/Aetna

Will Aetna cover the cost of COVID-19 testing for members?

Aetna will waive co-pays for all diagnostic testing related to COVID-19. This policy will cover the cost of physician-ordered testing for patients who meet CDC guidelines, which can be done in any approved laboratory location. Aetna will waive the member costs associated with diagnostic testing at any authorized location for all Commercial, Medicare and Medicaid lines of business. Self-insured plan sponsors will be able to opt-out of this program at their discretion.

- ✓ For the next 90 days, until June 4, 2020, Aetna will offer zero co-pay telemedicine visits for any reason. Aetna members should use telemedicine as their first line of defense in order to limit potential exposure in physician offices. Cost sharing will be waived for all virtual visits through the Aetna-covered Teladoc® offerings and innetwork providers delivering synchronous virtual care (live video-conferencing) for all Commercial plan designs. Self-insured plan sponsors will be able to opt-out of this program at their discretion.
- ✓ Aetna is **offering 90-day maintenance medication prescriptions for insured and Medicare members**. It is also working with state governments to make the same option available to Medicaid members where allowable. Self-funded plan sponsors will also be able to offer this option.
- Aetna is also waiving early refill limits on 30-day prescription maintenance medications for all members with pharmacy benefits administered through CVS Caremark.
- ✓ Through Aetna's Healing Better program, members who are diagnosed with COVID-19 will receive a care package containing CVS items to help relieve symptoms. The package will also include personal and household cleaning supplies to help keep others in the home protected from potential exposure.
- ✓ Aetna is also offering its Medicare Advantage brief virtual check-in and remote evaluation benefits to all Aetna Commercial members and waiving the co-pay. These offerings will empower members with questions or concerns that are unrelated to a recent office visit and do not need immediate in-person follow-up care to engage with

- providers without the concern of sitting in a physician's office and risking potential exposure to COVID-19.
- ✓ Beginning immediately, CVS Pharmacy will waive charges for home delivery of prescription medications. With the CDC encouraging people at higher risk for COVID-19 complications to stay at home as much as possible, this is a convenient option to avoid coming to the pharmacy for refills or new prescriptions.

Blue Cross Blue Shield Alabama

- ✓ Covering medically necessary diagnostic tests that are consistent with CDC guidance related to COVID-19 at no cost to our members with fully insured individual, employer-based, Federal Employee Program, and Medicare Advantage plans. For self-funded employer plans, members' cost share for diagnostic tests will be based on their benefit plan.
- ✓ Waiving prior authorizations for diagnostic tests and covered services that are medically necessary and consistent with CDC guidance for members diagnosed with COVID-19.
- ✓ 100% coverage for in-network COVID-19 related diagnosis as outlined by the CDC and American Medical Association for an office visit, urgent care visit, emergency room visit, behavioral health visit, or telehealth service.
- ✓ **Increased access to prescription medications** by waiving early medication refill limits on prescriptions and encouraging members to use their 90-day retail or mail order benefit.
- ✓ **Expanded telehealth coverage** to allow physicians, physician assistants, nurse practitioners and behavioral health practitioners to provide medically necessary services via telephone consultation.
- ✓ **Further expanded telehealth coverage** to include Speech Therapy, Occupational Therapy, and some Physical Therapy.
- ✓ **Further expanded telehealth coverage** to include two emergency codes for in-network dentists with waived co-pays for underwritten plans.
- ✓ Expanded co-pay waiver to include all telehealth services whether related to COVID-19 or not — for our fully insured plans. This policy includes Teledoc for the plans that have it. Self-insured plans will have the ability to choose this as an option as well.
- ✓ Extended weekend customer service hours for March 28-29 and April 4-5: Saturday: 8am 2pm | Central Time Sunday: 8am Noon | Central Time

✓ Established 24/7 emotional support line with New Directions (833-848-1764).

Bright Health

- ✓ No-cost COVID-19 diagnostic test-The COVID-19 diagnostic test and associated office visit is now covered as preventive care, at no cost to our members, regardless of network.
- ✓ Early medication refills.
- ✓ Transportation- We are making non-emergency transportation available to all members. We are also waiving ride limits for non-emergency visits to and from your doctor.
- ✓ Telehealth- Zero co-pay telemedicine visits for any reason.

Cigna

- ✓ Waives customer cost-sharing for office visits related to COVID-19 testing through May 31, 2020.
- √ Waives customer cost-sharing for telehealth screenings for COVID-19 through May 31, 2020.
- ✓ Waive out of pocket costs for virtual care visits related to screening, diagnosis or testing for COVID-19.
- ✓ Receive virtual medical care not elated to COVID-19 by physicians and certain providers with virtual care capabilities through May 31, 2020. Out-of-pocket costs may apply.
- ✓ Provides free home delivery of up to 90-day supplies for Rx maintenance medications available through the Express Scripts Pharmacy and 24/7 access to pharmacists.
- ✓ The company has opened a 24-hour toll-free help line (**1-866-912-1687**) to connect people directly with qualified clinicians who can provide support and guidance.

Humana

Humana (NYSE: HUM), a national health care company, has announced it is waiving consumer costs for treatment related to COVID-19-covered services. The company previously announced that it would cover out-of-pocket costs related to coronavirus testing. Now, costs related to subsequent treatment for COVID-19—including inpatient hospital admissions— will be waived for enrollees of Medicare Advantage plans, fully insured commercial members, Medicare Supplement and Medicaid.

The waiver applies to all medical costs related to the treatment of COVID-19 as well as FDA-approved medications or vaccines when they become available. There is no current end date. Humana will reassess as circumstances change.

- ✓ **Telehealth visits will be fully covered.** To support members in social isolation and to avoid COVID exposure for members and their physicians, Humana is encouraging members to use telehealth (either video or phone) as their first option for care, including routine visits for primary care or specialty care. We will waive our members' out-of-pocket costs for telemedicine visits with participating in-network providers for the next 90 days, beginning March 6, 2020. This will apply to Humana's Medicare Advantage, Medicaid and employer-plan members and is limited to in-network providers.
- ✓ Waiving the out-of-pocket costs (copays, coinsurance and deductibles) associated with COVID-19 testing, including related visit costs in a range of clinical settings such as a physician's office, urgent care center or emergency department;
- ✓ **Allowing early prescription refills**, so members can prepare for extended supply needs an extra 30- or 90-day supply as appropriate;
- ✓ Member support line available Humana has trained a specialized group of call center employees to help support members with specific coronavirus questions and concerns, including live assistance with telemedicine. Members can call Humana's toll-free customer support line, which can be found on the back of their member I.D. card, to be connected to this dedicated team of professionals.

United Healthcare

- ✓ Waiving member cost-sharing for the treatment of COVID-19 until May 31, 2020 for Medicare Advantage, Medicaid, Individual and Group Market fully insured health plans.
- ✓ Waive cost-sharing for **in-network**, **non-COVID-19 telehealth visits** for its Medicare Advantage, Medicaid, Individual and Group Market fully insured health plans.

- ✓ Waive cost-sharing for telehealth visits related to COVID-19 testing, in addition to waiving cost-sharing for 24/7 Virtual Visits with preferred telehealth partners.
- ✓ Early prescription refills.
- ✓ Our free 24/7 emotional support line is here for you to call any time at 866-342-6892. This Optum Help Line is staffed by professionally trained mental health experts. It is free of charge and open to anyone.
- ✓ A free on-demand emotional support mobile app called Sanvello, is available to help you cope with stress, anxiety and depression during the COVID-19 pandemic.

VIVA Health (Commercial-fully-insured, self-insured)

Testing. 100% coverage of FDA-approved lab testing from a participating/in-network reference lab as well as the Alabama Department of Public Health and at Viva Health approved laboratory locations in accordance with the U.S. Centers for Disease Control and Prevention (CDC) guidelines on all plans. No deductible, copayment, or coinsurance will apply to the medically necessary lab test for any Viva Health plan. For most Viva Health plans, there will also be no cost-sharing for an in-network office visit, urgent care center visit, or emergency department visit related to COVID-19 testing, although some employers may choose to apply this cost-sharing on their self-funded plans.

Telehealth. Members can have telehealth visits from any location with any in-network provider who is providing medically appropriate covered services. Members will not have a copayment for telehealth visits with their in-network provider for the next 30 days. Some employer plans also include telehealth visits through Teladoc or other vendors. Members with this Teladoc coverage through Viva Health can also access this benefit with no copayment for the next 30 days. Members in health savings account-eligible high deductible health plans will be subject to normal cost-sharing on telehealth visits, except for visits with a COVID-19 diagnosis or another diagnosis approved by the IRS at 100%.

Prescription refills. On plans that include prescription drug coverage through Viva Health, members can get early refills of their maintenance medications if needed. Members are encouraged to secure a 90-day supply of non-specialty maintenance medications available through most retail pharmacies. Home delivery from our mail-order pharmacy is available on all plans for most medications by contacting Express Scripts at 855-778-1485.

Treatment. If a member tests positive for the virus, treatment will be covered just as treatment for other illnesses is covered according to the terms and member cost sharing in your benefit plan. While the lab test and telehealth visits are covered at 100% as described above, applicable cost-sharing for treatment of COVID-19 in office visits, ER visits, urgent care visits and hospital admissions will apply as they do for other illnesses.

VIVA Health (Medicare)

As concerns over the spread of the 2019 coronavirus disease (COVID-19) grow, we want to inform you of the steps Viva Medicare is taking for members to remove barriers to appropriate testing and care effective Friday, March 13, 2020:

Testing. 100% coverage of FDA-approved lab testing from a participating/in-network reference lab as well as the Alabama Department of Public Health and at Viva Health approved laboratory locations in accordance with the U.S. Centers for Disease Control and Prevention (CDC) guidelines on all plans. No deductible, copayment, or coinsurance will apply to the medically necessary lab test or to a related in-network office visit, urgent care center visit, or emergency department visit.

Telehealth. Members can have telehealth visits from any location with any in-network provider who is providing medically appropriate covered services. Members will not have a copayment for telehealth visits with their in-network provider for the next 30 days.

Prescription refills. On plans that include prescription drug coverage through Viva Health, members can get early refills of their maintenance medications if needed. Members are encouraged to secure a 90-day supply of non-specialty maintenance medications available through most retail pharmacies. Home delivery from our mail-order pharmacy is available on all plans for most medications by contacting CVS/Caremark at 866-788-5146.

Treatment. If a member tests positive for the virus, treatment will be covered just as treatment for other illnesses is covered according to the terms and member cost sharing in your benefit plan. While the lab test and telehealth visits are covered at 100% as described above, applicable cost-sharing for treatment of COVID-19 in office visits, ER visits, urgent care visits and hospital admissions will apply as they do for other illnesses.

Medicare

- ✓ No out-of-pocket cost for lab tests for COVID-19.
- ✓ Covers all medically necessary hospitalizations.
- ✓ Cover vaccine for COVID-19, if one becomes available.
- ✓ Waive cost-sharing for COVID-19 lab tests.
- ✓ Coverage for telehealth- "virtual check-in".

Alabama Medicaid

- ✓ No Co-pays for all services including, but not limited to doctor visits, optometric services, certified nurse practitioner visits, health care center visits, rural health clinic visits, inpatient hospital, outpatient hospital, prescription drugs, medical equipment, supplies and appliances, and ambulatory surgical centers. No referrals needed for Early, Periodic, Screening, Diagnosis and Treatment Program ("EPSDT"), Primary Care Provider, or Delivering Health Care Provider.
- ✓ Alabama Coordinated Health Network ("ACHN") care coordination available to help by phone.
- ✓ Mental Health services available.
- ✓ No cancellation of coverage during emergency unless you move out of state or you request it.
- ✓ Encouraging use of telemedicine.

SEIB

- ✓ Medicare Members: Please visit the UnitedHealthcare (UHC) website for UHC's general information about COVID-19 or UHC's frequently asked questions about COVID-19. Please call 866-890-0562 with questions about your UHC coverage.
- ✓ Non-Medicare Members: For medical coverage questions, please visit the Blue Cross Blue Shield of Alabama website. Please call 800.824.0435 with questions about your medical coverage.
- ✓ For prescription coverage questions, please visit the OptumRx website. Please call 844.785.1604 with questions about your prescription drug coverage.

Wellfleet- A Berkshire Hathaway Company

- ✓ Wellfleet's fully insured Student Health plans will cover member costs for COVID-19 testing. We'll waive all co-pays, deductibles and co-insurance. Like a preventive visit, members will have no out-of-pocket costs for testing.
- ✓ Wellfleet Student Health Insurance Plan (SHIP) members, many of whom have left campuses, should contact their student health care centers or visit their school's page on Wellfleetstudent.com to find a provider. When contacting providers regarding COVID-19, members should advise of recent travel and symptoms, and minimize contact with others.
- ✓ If members need treatment for COVID-19, coverage is provided based on their plan's specific benefits. SHIP members can find their plan information by logging in to their accounts on Wellfleetstudent.com.

- ✓ We have waived requirements for student members who typically need to access care or referrals from student health centers. Members can seek testing or treatment for COVID-19 at any local medical facility – including the emergency room, urgent care, and office visits.
- ✓ Wellfleet Rx members can continue to contact us at normal business hours, and we are prepared to provide fill-too-soon overrides for members traveling.
- ✓ Wellfleet has a dedicated Coronavirus hotline to answer any of your questions: (833) 343-5338. Hours are Monday – Thursday 8:30 AM – 7:00 PM, and Friday 8:30 AM – 5:00 PM.

Trustmark Insurance Company

- ✓ Coverage for COVID-19 testing and testing-related visits without any cost sharing requirements deductible, copayment, coinsurance) or prior authorization or other medical management requirements.
- ✓ Suspension of prescription fill or refill limitations, waiving charges for home delivery.
- ✓ Supporting the use of telehealth for all types of services, including cost-sharing waivers consistent with the Families First Coronavirus Response Act.
- ✓ Allowing access to medically necessary care out-of-network where in-network care cannot be provided due to access constraints, for an amount equal to in-network costsharing.

PEEHIP

If you have an **URGENT** retirement or PEEHIP insurance issue that requires immediate attention, you may call 334.517.7000 or 877.517.0020. Although the RSA and PEEHIP staff are making every effort to assist you as soon as possible, please be aware that there may be significant delays in answering calls. Also please be aware that inquiries related to immediate medical situations will take priority, so if your call is related to a need for medication or access to medical care through your PEEHIP insurance, please hold on the line until someone answers your call.

American National Insurance Company

- ✓ Deductible, co-pays and coinsurance will be waived on all screening and diagnostic testing related to COVID-19. This also applies to related office visit, urgent care center and emergency room charges incurred to obtain the test.
- ✓ If your plan has prescription coverage, early refill limits will be waived on 30-day prescription maintenance medications.
- ✓ Precertification requirements for COVID-19 related services and inpatient stays are being waived for the next 90 days.
- ✓ Members are encouraged to utilize telemedicine to limit their exposure to COVID-19. Telemedicine services are covered under your plan in the same manner as any other face-to-face visit.

Additional Resources

Eli Lilly and Company

In response to the crisis caused by COVID-19, Lilly is introducing the **Lilly Insulin Value Program**, allowing anyone with commercial insurance and those without insurance to fill their monthly prescription of Lilly insulin for \$35. The program is effective today and covers most Lilly insulins. Details and more information can be found in the press release here: https://e.lilly/2wjEr7J.